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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name S40275

(7)

COLORS UNLIMITED CORPORATION

FILED Mar 09 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address					• • • • • • • • • • • • • • • • • • • •	
606 93RD AV	EN	606 93RD AVE NO			j			
NAPLES FL 33963 NAPLES FL 33963					DO ALOT IMPLIES IN THIS COACE			
US	US				DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifi	ea		i
A Driver I	No area (Duning and)	On Malling Address .			03/19/1991 4. FEI Number		T 14	
	Bue Point Ave	26 /508 Blue	e Poin	+ Alles.	4. FEI Number		-	pplied For
				11100	65-0252229			ot Applicable
Suite, Apt.	#, ejc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ >		Additional equired
22 City # Ctal		27 City & 64-10						
City & Stat	10 Q 1 a	City & State	FL		6. Election Campaign Financin Trust Fund Contribution	_	•	May Be to Fees
Zin	Country A	Zip	Country 30		8. This corporation owes or ha			
24 34/0	\mathcal{F} $_{25}$ USA	29 34/02	30	SA	Personal Property Tax due			J No I
	9. Name and Address of Current F		 		10. Name and Address of Nev		nt	
RE	NEFIELD, REBECCA S		81	Mame (2 01 On house			
	B 93RD AVE NO	-	Perus	reca, rescue	01			
	PLES FL 33963		82	Street Addres	ss B.Q. Box Number is Net Acte	ienue		
NA	rego re 33803		83	, U U_	P /			
			84	CilVapa	lec	85	5 Zip	Eggen a
		. John Jean E J. St. T.				FL_"	<u> </u>	4100
11. Pursuant office or I	to the provisions of Sections 607,0502 a	no 607.1508, Florida Sta tute Florida. Such change was a	es, the above authorized by	-named corpo- the corporatio	pration submits this statement for t on's board of directors. I hereby a	ne purpose of cha ccept the appointr	inging i ment as	ris registered s reaistered
agent. I a	egistered agent, or both, in the State of im familiar with, and accept the obligation	ns of, Section 607.0505, F/o	rida Statutes	61	4 - 4	2///	,	
SIGNATURE	Reduccas Denetic	Ca, VIS K	eveces	L DOU	refueld	2/2/48		
 -	Signature, typed or printed name of registered agent a			nt signature required		DATE		
12.	OFFICERS AND D		13,	178	LÁDDITIONS/CHANGES TO O			
TALE	<u>P</u>	☐ DELETE	1.1 TITLE	1	C 44 11 1 A		Change	☐ Addition
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CITY-ST-ZIP	NAPLES FL 33963		1.4 CITY-ST	-ZIP KA	uples, FL 34102			
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CITY-ST-ZIP	NAPLES FL 33963		2. 4 CITY - S	I-ZIP	Des 4. 34102			İ
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CITY-ST-ZIP			6.4 CITY-ST	· ZIP				

r nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report is report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. Peleca & Berefield Repens. Benefield